The Evaluation of Individual Budgets

Messages for Policy and Practice

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Bridgewater Hall, Manchester
The Evaluation of Individual Budgets

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Individual budgets (IBs)

- Central to the government’s ambition to ‘modernise’ social care …
- … at the heart of the ‘personalisation’ agenda …
- … to promote choice
- 2005 – Cabinet Office Strategy Unit report; and Social Care Green Paper
- July 2005 – invitation to English LAs to be pilots - 13 selected
- What did we find from the evaluation of the pilots? What can we learn?
Principles underlying IBs

- A greater role for service users in assessment of their needs.

- Individuals should know the resources available to them for before their support needs.

- Test opportunities to integrate resources from several funding streams into a single IB.

- Simplify and integrate/align multiple assessment processes and eligibility criteria. But adult social care should be the gateway to an IB.

- Encourage individuals with an IB to identify the outcomes they wish to achieve and the ways to achieve them.

- Support individuals as they plan how to use their IBs – including information on costs and availability of service options.

- Experiment with different options for deploying IBs (ways of managing and using the resources).
Potentially pooled funds

- **Social care** (LA adult care)
- **Supporting People** – housing-related (CLG)
- **Independent Living Fund** - for disabled people (NDPB)
- **Disabled Facilities Grant** – home adaptations for disabled people (LA)
- **Access to Work** – for disabled people (DWP)
- **Integrated Community Equipment Service** – people in need (DH)
### Pilot sites (1-6)

<table>
<thead>
<tr>
<th>Physical/sensory impairment, learning disability</th>
<th>1 Long-term conditions, 1 Learning disability (LD), 1 Review team, 1 Intake team</th>
<th>AtW, ILF, SP</th>
</tr>
</thead>
<tbody>
<tr>
<td>Physical/sensory impairment, learning disability, older people</td>
<td>1 Occupational Therapist (OT), 2 Older People (OP), 1 Hospital, 1 Physical Disability (PD)/HIV under 65, 1 LD</td>
<td>AtW, DFGs, ICES, ILF, SP</td>
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<tr>
<td>Mental health</td>
<td>4 Mental Health (MH)</td>
<td>AtW, ILF, SP</td>
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<tr>
<td>Older people</td>
<td>10 OP, 1 OP/MH, 1 Hospital team</td>
<td>DFGs, ICES, ILF, SP</td>
</tr>
<tr>
<td>Physical disability, learning disability, mental health, older people</td>
<td>1 OP, 1 LD, 1 PD, 1 MH</td>
<td>AtW, DFGs, ICES, ILF, SP</td>
</tr>
<tr>
<td>Physical disability, learning disability</td>
<td>1 lead team working on IBs</td>
<td>AtW, DFGs (later in pilot), ICES, ILF, SP</td>
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<tr>
<td>Pilot sites (7-13)</td>
<td>2 OP/Disability (not LD), 1 Sensory Impairment (SI), 1 LD</td>
<td>AtW, ICES, ILF, SP</td>
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<tr>
<td>Physical disability, learning disability, mental health, older people</td>
<td>All teams: 5 MH, 1 vulnerable adults, 1 LD, 1 SI, 3 OP.</td>
<td>AtW, DFGs, ICES, ILF, SP</td>
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<tr>
<td>Older people</td>
<td>6 OP, 3 LD, 3 PD</td>
<td>AtW, DFGs, ICES, ILF, SP</td>
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<tr>
<td>Physical disability, learning disability</td>
<td>1 PD, 2 LD</td>
<td>AtW, DFGs, ICES, ILF, SP</td>
</tr>
<tr>
<td>Transitions, learning disability, older people</td>
<td>1 Transition, 1 Review (PD, LD, MH)</td>
<td>DFGs, ICES, ILF, SP</td>
</tr>
<tr>
<td>Transitions, physical disability, learning disability, mental health</td>
<td>3 LD, 1 PD, 1 SI, 1 children’s, 4 MH</td>
<td>AtW, DFGs (later in pilot), ICES, ILF, SP</td>
</tr>
<tr>
<td>Physical/sensory impairment, learning disability, mental health, older people</td>
<td>5 OP, 1 LD, 1 PD, 1 children’s, 7 MH</td>
<td>AtW, DFGs (later in pilot), ICES, ILF, SP</td>
</tr>
</tbody>
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IBSEN evaluation questions

CORE QUESTION → Do individual budgets offer a better way to support disabled adults and older people than conventional methods of resource allocation and service delivery?

If so, which models work best and for whom?

**Evaluation dimensions**

- User experience
- Carer impact
- Workforce
- Care management
- Provider impact

- Risk & protection
- Commissioning
- Outcomes
- Costs
- Cost-effectiveness
Evaluation elements

- Randomised trial – IB and comparison groups
- Follow-up interviews with users after 6 months → some challenges
- In-depth user interviews – support planning process
- Interviews with IB leads, providers, funding stream lead officers, other managers
- Interviews and diaries, front-line staff and first-tier managers
Stakeholder Perspectives

- 959 Service users
- 153 carers
- 91 Care Coordinators/care managers and first tier managers
- 14 Adult Protection Officers
- 16 Providers
- 7 Commissioning Managers
- 13 Individual Budget Leads
Acknowledgements

- Service users
- Carers
- Pilot sites and their staff
- User carer advisory group
- User group who assisted testing interview schedules
- Interviewers, including our older and disabled interviewers
- Professor Gerald Wistow, academic advisor to DH
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